## **APPLICATION DATA SHEET**

<b>Applicat</b>	ion In	format	ion
-----------------	--------	--------	-----

**Application Number::** 

Filing Date::

09/10/04

**Application Type::** 

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R::

None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

No

Computer Readable Form (CRF)?::

No

Number of Copies of CRF::

Title:

OPTICAL FIBER RECEIVER HAVING AN

**INCREASED BANDWIDTH** 

Attorney Docket Number::

60291.25

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

2

**Total Drawing Sheets::** 

3

Small Entity?::

No

Latin name::

Variety denomination name::

Petition Included?::

No

Petition Type::

Licensed US Government Agency::

**Contract or Grant Numbers::** 

Secrecy Order in Parent Application?:: No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship

Country:: Germany

Status:: Full Capacity

Applicant One Given Name:: Horst

Middle Name::

Family Name:: ZIMMERMAN

Name Suffix::

City of Residence:: Wien

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address :: Heinrich-Collin-Str. 29-31, Stiege 3/6, A-1140

City of Mailing Address:: Wien

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**Applicant Information** 

Applicant Authority Type::

Inventor

Primary Citizenship

Country::

Germany

Status::

**Full Capacity** 

Applicant Two Given Name::

Michael

Middle Name::

Family Name::

**FIERTSCH** 

Name Suffix::

City of Residence::

Wien

State or Province of Residence::

Country of Residence::

Germany

Street of Mailing Address ::

Linzerstr. 192/17, A-1140

City of Mailing Address::

Wien

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

**Applicant Information** 

**Applicant Authority Type::** 

Inventor

**Primary Citizenship** 

Country::

Germany

Status::

**Full Capacity** 

Applicant Three Given Name::

Holger

Middle Name::

Family Name::

**PLESS** 

Name Suffix::

City of Residence::

Wien

State or Province of Residence::

Country of Residence::

Germany

Street of Mailing Address ::

Zum Warte Turn 240

City of Mailing Address::

Bienstadt

State or Province of Mailing Address::

Country of Mailing Address::

Germany

Postal or Zip Code of Mailing Address::

99100

### **Correspondence Information**

Correspondence Customer No.::

21967

Name::

**Hunton & Williams LLP** 

Street of Mailing Address ::

1900 K Street, N.W.

City of Mailing Address:

Washington, DC

State or Province of Mailing Address::

Country of Mailing Address::

**USA** 

Postal or Zip Code of Mailing Address 20006-1109

Phone Number::

202-955-1500

Fax Number::

202-778-2201

E-Mail Address::

tcoddington@hunton.com

**Representative Information** 

Representative Customer Number::

21967

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing
			Date::
This Application	Claims priority to	PCT/DE03/00969	24 March 2003
			***

# **Foreign Priority Information**

Country:	Application Number::	Filing Date::	Priority Claimed::
Germany	10213045.0	22 March 2002	Yes

### **Assignee Information**

Assignee Name:: Melelxis GmbH

Street of Mailing Address :: Haarbergstrasse 67,

City of Mailing Address:: Efurt

State of Province of Mailing Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing Address:: 99097